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Image# 201507149000118947

FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3X   F	For Other Than An A	Authorized Comm	ittee	Offic	ce Use Only
1. NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If ty		12FE4M5	
CROP INSURANCE P	ROFESSIONALS	ASSOCIATION	PAC-CIPA	A PAC	
ADDRESS (number and street)  Check if different than previously reported. (ACC)	316 Pennsylvania Ave S Suite 401 WASHINGTON	SE		DC 20	0003
2. FEC IDENTIFICATION NU	JMBER ▼	CITY 🛦		STATE ▲	ZIP CODE ▲
C C00503680	3	. IS THIS X	NEW (N) <b>OR</b>	AMEND (A)	ED
4. TYPE OF REPORT (Choose One)  (a) Quarterly Reports:  April 15 Quarterly Report (C) July 15 Quarterly Report (C) Quarterly Report (C) January 31 Year-End Report (Y) July 31 Mid-Year Report (Non-electio Year Only) (MY)  Termination Report (TER)	Report Due On:  (c) 12-Day PRE-Election Report for the  (d) 30-Day POST-Election Report for the	e: Convention ection on General (3	n (12C)	Aug 20 (N Sep 20 (N Oct 20 (M General (12G) Special (12S)	M9) Dec 20 (M12) (Non-Election Year Only)  Location Year Only)  Jan 31 (YE)
5. Covering Period 06	5 01 20			30	2015
I certify that I have examined th  Type or Print Name of Treasure	•	t of my knowledge an	d belief it is tr	ue, correct and con	nplete.
Signature of Treasurer Jack		[Electronic	ally Filed] [	Date 07_	14 2015
NOTE: Submission of false, errone	eous, or incomplete inform	ation may subject the p	person signing t	his Report to the pe	nalties of 2 U.S.C. §437g.
Office Use				F	EC FORM 3X Rev. 12/2004

#### **SUMMARY PAGE** OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003) Page 2

Write or Type Committee Name

#### CROP INSURANCE PROFESSIONALS ASSOCIATION PAC-CIPA PAC

06 01 2015 06 30 2015 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 33132.27 January 1, 2015 (b) Cash on Hand at 63956.34 Beginning of Reporting Period..... 84925.00 17825.00 (c) Total Receipts (from Line 19) ..... (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 81781.34 118057.27 6(a) and 6(c) for Column B)..... 30645.90 66921.83 Total Disbursements (from Line 31)...... Cash on Hand at Close of 8. Reporting Period 51135.44 51135.44 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... 10. Debts and Obligations Owed BY the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

#### For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

#### **DETAILED SUMMARY PAGE**

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

### CROP INSURANCE PROFESSIONALS ASSOCIATION PAC-CIPA PAC

R	eport Covering the Period: From: 06		06 30 / 2015			
	I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date			
11.	Contributions (other than loans) From:  (a) Individuals/Persons Other					
	Than Political Committees (i) Itemized (use Schedule A)	17125.00	78525.00			
	(ii) Unitemized(iii) TOTAL (add	700.00	5400.00			
	Lines 11(a)(i) and (ii)▶	17825.00	83925.00			
	(b) Political Party Committees	0.00	0.00			
	(such as PACs)(d) Total Contributions (add Lines	0.00	1000.00			
12	11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	17825.00	84925.00			
12.	Party Committees	0.00	0.00			
13.	All Loans Received	0.00	0.00			
	Loan Repayments Received  Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00			
16.	Refunds of Contributions Made to Federal Candidates and Other					
17.	Political Committees Other Federal Receipts	0.00	0.00			
	(Dividends, Interest, etc.)	0.00	0.00			
	(from Schedule H3)	0.00	0.00			
	(b) Levin Funds (from Schedule H5)	0.00	0.00			
	(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00			
19.	Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))▶	17825.00	84925.00			
20.	Total Federal Receipts (subtract Line 18(c) from Line 19)▶	17825.00	84925.00			

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date		
. Operating Expenditures: – (a) Allocated Federal/Non-Federal		Jaionaa Tour to Date		
Activity (from Schedule H4)	0.00	0.00		
(i) Federal Share	0.00	0.00		
(ii) Non-Federal Share	0.00	0.00		
(b) Other Federal Operating				
Expenditures	145.90	921.83		
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))▶	145.90	921.83		
Transfers to Affiliated/Other Party				
Committees	0.00	0.00		
Contributions to Federal Candidates/Committees and Other Political Committees	30500.00	66000.00		
Independent Expenditures	0.00	0.00		
(use Schedule E)Coordinated Party Expenditures	0.00	0.00		
(2 U.S.C. §441a(d)) (use Schedule F)	0.00	, , 0.00		
Loan Repayments Made	0.00	0.00		
Loans MadeRefunds of Contributions To:	0.00	0.00		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00		
(b) Political Party Committees	0.00	0.00		
(c) Other Political Committees (such as PACs)	0.00	0.00		
,				
(d) Total Contribution Refunds	0.00			
(add Lines 28(a), (b), and (c))▶	0.00	0.00		
Other Disbursements	0.00	0.00		
Federal Election Activity (2 U.S.C. §431(20))				
(a) Allocated Federal Election Activity				
(from Schedule H6)	0.00	0.00		
(i) Federal Share	0.00	0.00		
(ii) "Levin" Share	0.00	0.00		
(b) Federal Election Activity Paid Entirely		200		
With Federal Funds (c) Total Federal Election Activity (add	0.00	0.00		
Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00		
Total Disbursements (add Lines 21(c), 22,				
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	30645.90	66921.83		
Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii)				
from Line 31)	30645.90	66921.83		

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures				
3. Total Contributions (other than loans) (from Line 11(d), page 3)	17825.00	84925.00		
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00		
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	17825.00	84925.00		
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	145.90	921.83		
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00		
8. Net Operating Expenditures (subtract Line 37 from Line 36)	145.90	921.83		

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:				GE 6 OI	F 16	
	(check only one)					
	<b>X</b> 11a	11b	11c	12		
	13	14	15	16	17	

or for commercial purposes, other than using	the name and address of any political committee to	o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) CROP INSURANCE PROFES	SSIONALS ASSOCIATION PAC-CI	PA PAC
Full Name (Last, First, Middle Initial)  A. Eric D. Cook  Mailing Address 13630 Hunters Crossing		Date of Receipt
City	State Zip Code	06 24 2015 Transaction ID : SA11AI.5079
Bath	MI 48808	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1250.00
Name of Employer	Occupation	
Spartan Insurance Agency	Sales	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1250.00	
Full Name (Last, First, Middle Initial)  3. Matthew Gaynier		Date of Receipt
Mailing Address 8462 Willow Glen Ct		06 24 2015
City	State Zip Code	Transaction ID : SA11AI.5076
Holland	OH 43528	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Spartan Insurance	Occupation	
Receipt For:	Owner/Agent	
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼  250.00	
Full Name (Last, First, Middle Initial)  C. Michael Gaynier		Date of Receipt
Mailing Address 433 Saint Marys Ave		06 24 2015
City	State Zip Code	Transaction ID : SA11AI.5078
Monroe	MI 48162	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	1000.00
Name of Employer	Occupation	1
Spartan Insurance Agency	Insurance	
Receipt For:  Primary  General	Aggregate Year-to-Date ▼	
Other (specify) ▼	1100.00	
SUBTOTAL of Receipts This Page (optional)		2500.00
TOTAL This Period (last page this line numb	er only)	

Use separate schedule(s) for each category of the Detailed Summary Page

l	FOR LINE NUMBER:			PAGE	7	OF		16		
l	(check only one)									
	X	11a		11b		11c	12	2		
l		13		14		15	16	6		17

or for commercial purposes, other than using	the name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) CROP INSURANCE PROFE	SSIONALS ASSOCIATION PAC-CII	PA PAC
Full Name (Last, First, Middle Initial)  Joanie Grimes		Date of Receipt
Mailing Address PO Box 802		06 24 _ 2015 _
City Hillsboro	State Zip Code OH 45133	Transaction ID : SA11AI.5077  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer  Premium Ag Commodities Inc.  Receipt For:  Primary  General	Occupation Agent  Aggregate Year-to-Date ▼	
Other (specify)	600.00	
Full Name (Last, First, Middle Initial)  Raford Hargrove  Mailing Address PO Box 400		Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Rotan FEC ID number of contributing	State Zip Code TX 79546	Transaction ID : SA11AI.5084  Amount of Each Receipt this Period
federal political committee.  Name of Employer Self	Occupation	4800.00
Receipt For: Primary General Other (specify)	Crop Insurance  Aggregate Year-to-Date ▼  4800.00	
Full Name (Last, First, Middle Initial)  John R. Keister		Date of Receipt
Mailing Address PO Box 340	7. 6. 1	06 16 2015
City Blue Earth	State Zip Code MN 56013	Transaction ID : SA11AI.5071  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	2100.00
Name of Employer Minn-Iowa Crop Insurance	Occupation Insurance Agent	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  2200.00	
SUBTOTAL of Receipts This Page (optional)	) <b>&gt;</b>	7400.00
TOTAL This Period (last page this line numb	per only)	

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:				PAGE		8	OF		16		
	(check only one)										
	X	11a		11b		11c		12	2		
		13		14		15		16	6		17

or	for commercial purposes, other than using the	name and address of any political committee to	solicit contributions from such committee.
$\rangle$	NAME OF COMMITTEE (In Full) CROP INSURANCE PROFESSI	ONALS ASSOCIATION PAC-CIP	A PAC
١.	Full Name (Last, First, Middle Initial) Travis Keister		Date of Receipt
	Mailing Address 918 Upper Valley Drive		06 16 _ 2015 _
	City	State Zip Code	Transaction ID : SA11AI.5070
	Blue Earth	MN 56013	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	2000.00
	Name of Employer Minn-Iowa Crop Insurance	Occupation Insurance Agent	
	Receipt For:		
	Primary General Other (specify) ▼	Aggregate Year-to-Date ▼  2100.00	
3.	Full Name (Last, First, Middle Initial) Jon King		Date of Receipt
	Mailing Address 32 Dockside Drive		06 24 _2015 _
	City	State Zip Code	Transaction ID : SA11AI.5073
	Lake Tapawingo	MO 64015	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	100.00
	Name of Employer Gavilon Group LLC	Occupation Insurance	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  300.00	
).	Full Name (Last, First, Middle Initial) Chris Tank		Date of Receipt
	Mailing Address 1700 South First Ave East Dale Plaza #24		06 24 2015
	City	State Zip Code	Transaction ID : SA11AI.5080
	Iowa City	IA 52240	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	4950.00
	Name of Employer	Occupation	
	Ag Risk Insurance	Agent	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	4950.00	
s	UBTOTAL of Receipts This Page (optional)	<u> </u>	7050.00
Т	OTAL This Period (last page this line number o	nly)	

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:				PAGE		9	OF		16	
	(check only one)									
	X 1	1a	11b		11c		12			
	1	3	14		15		16			17

or for commercial purposes, other than using	ng the name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) CROP INSURANCE PROF	ESSIONALS ASSOCIATION PAC-CI	PA PAC
Full Name (Last, First, Middle Initial)  A. Marva Ulleland		Date of Receipt
Mailing Address 1700 S Assembly Street PO Box 2515		06 24 2015
City	State Zip Code	Transaction ID : SA11AI.5081
Spokane	WA 99220	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	50.00
Name of Employer	Occupation	
Northwest Farm Credit Services	VP Operations	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General  Other (specify) ▼	950.00	
Full Name (Last, First, Middle Initial)  3. Marva Ulleland		Date of Receipt
Mailing Address 1700 S Assembly Street		M = M / D = D / Y = Y = Y
PO Box 2515		06 24 2015
City	State Zip Code	Transaction ID : SA11AI.5082
Spokane	WA 99220	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	50.00
Name of Employer	Occupation	
Northwest Farm Credit Services	VP Operations	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial)  Marva Ulleland		Date of Receipt
Mailing Address 1700 S Assembly Street PO Box 2515		06 24 2015
City	State Zip Code	Transaction ID : SA11AI.5083
Spokane	WA 99220	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	75.00
Name of Employer	Occupation	-
Northwest Farm Credit Services	VP Operations	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify) ▼	1075.00	
SUBTOTAL of Receipts This Page (option	al)	175.00
		17125.00
TOTAL This Period (last page this line nul	mber only)	17123.00

### S 17

SCHEDULE B (FEC Form 3X)			FOR LINE NUMBER		
ITEMIZED DISBURSEMENTS		Use separate schedule(s	FOR LINE		
		for each category of the	(Criccit Orling		
		Detailed Summary Page	X 21b	22 23 24 25 26	
_			27	28a 28b 28c 29 30l	
Ar	ny information copied from such Reports and Statem	nents may not be sold or u	sed by any pers	on for the purpose of soliciting contributions	
	for commercial purposes, other than using the nam				
$\setminus$	NAME OF COMMITTEE (In Full)				
$  \rangle$	CROP INSURANCE PROFESSION	JALO ACCOCIATI			
/	CROP INSURANCE PROFESSION	NALS ASSOCIATION	JN PAC-CII	PAPAC	
_	Full Name (Last, First, Middle Initial)				
Δ				Date of Disbursement	
Λ.	Paypal				
	Mailing Address 2014 North First Otrest	M M / D D / Y Y Y Y Y			
	Mailing Address 2211 North First Street			06 19 2015	
	City				
	San Jose	State Zip Code CA 95131		Transaction ID: SB21B.5067	
	Purpose of Disbursement	95131			
	Online CC Fees			Amount of Each Disbursement this Period	
				Amount of Each disbursement this Period	
	Candidate Name		Category/	145.90	
			Туре	143.30	
	Office Sought: House Disbursen				
	Senate	Primary General			
	President	Other (specify) ▼			
	State: District:				
	Full Name (Last, First, Middle Initial)				
В.		Date of Disbursement			
		M M / D D / Y Y Y Y			
	Mailing Address				
	City	State Zip Code			
	·	·			
	Purpose of Disbursement				
				Amount of Each Disbursement this Period	
	Candidate Name		Category/		
			Type		
	Office Sought: House Disbursen	nent For:			
	Senate	Primary General			
		Other (specify) ▼			
	State: District:	(op. co., ) •			
_	Full Name (Last, First, Middle Initial)				
C.	ruii Name (Last, First, Middle Illitial)	Date of Disbursement			
Ů.					
	Mailing Adduses				
	Mailing Address				
	City				
	City				
	Purpose of Disbursement				
	•	Amount of Each Disbursement this Period			
	Candidate Name  Category/ Type			Amount of Lacif Dispulsement this Period	
	Office Sought: House Disbursen	nent For:	Туре		
		Primary General			
		Other (specify) ▼			
_	State: District:				
				445.00	
S	SUBTOTAL of Disbursements This Page (optional)		·····	145.90	
Г				445.00	
Iт	OTAL This Period (last nage this line number only)			145.90	

3(	CHEDULE B (FEC Form 3X)		FOR LINE NUMBER:				PAGE 11 OF 16
ITI	EMIZED DISBURSEMENTS		ate schedule(s) ategory of the	(check only		, —	
			ummary Page	21b	22 X		24 25 26
_				27	28a		28c 29 30b
	y information copied from such Reports and Statem for commercial purposes, other than using the nam						
<del>\</del>	NAME OF COMMITTEE (In Full)	io and addre	oo or arry pointed		CONOR CONTIN		odon committee.
	CROP INSURANCE PROFESSION	ΛΔΙ S ΔS	SOCIATION	N PAC-CIE	ΡΔ ΡΔC		
	ONOT INCOMPRISE THOSE ESCIO	<b>1</b> / (LO / (C	00001/11101	<b>1</b> 1710 011	711710		
_	Full Name (Last, First, Middle Initial)						
Α.	BOEHNER FOR SPEAKER				Date of Dis	sbursement	
	Mailing Address 320 FIRST ST., SE				06 /	15	2015
	Maining Address 3201 INST ST., SE				00	10	2013
	City	State	Zip Code		Transact	ion ID : SB2	2 5040
	WASHINGTON	DC	20003		Hansacı	1011 10 . 362	23.3046
	Purpose of Disbursement Political Contribution				Amount of	Each Diabi	rsement this Period
	Candidate Name				Amount of	Lacii Disbu	irsement this Fehou
				Category/ Type	L	<b>4</b> 0 1 1	5000.00
	Office Sought: House Disbursen	nent For: 20	D15	. , , , ,		,	,
	Senate	Primary	General				
		Other (speci					
	State: OH District: 08		Other				
R	Full Name (Last, First, Middle Initial)				Date of Die	sbursement	
٠.	FREEDOM PROJECT; THE				M M /		Y
	Mailing Address 320 1ST STREET SE				06	15	2015
	City	State	Zip Code		T	ian ID . CD	23.5048.0
			•		rransact	יםפי: מו ווטו	20.0070.0
	•	DC	20003		Transact	1011 ID : 364	23.30-40.0
	WASHINGTON		•				rsement this Period
	WASHINGTON Purpose of Disbursement		•	Category/			rsement this Period
	WASHINGTON Purpose of Disbursement Political Contribution Candidate Name	DC	20003	Category/ Type			
	WASHINGTON Purpose of Disbursement Political Contribution  Candidate Name  Office Sought: House Disbursem	nent For: 20	20003			Each Disbu	rsement this Period
	WASHINGTON Purpose of Disbursement Political Contribution  Candidate Name  Office Sought: House Disbursem Senate	nent For: 20 Primary	20003 015 General		Amount of	Each Disbu	rsement this Period
	WASHINGTON Purpose of Disbursement Political Contribution  Candidate Name  Office Sought: House Disbursem Senate	nent For: 20	20003 015 General		Amount of	Each Disbu	rsement this Period
	WASHINGTON Purpose of Disbursement Political Contribution  Candidate Name  Office Sought: House Disbursem Senate President	nent For: 20 Primary	20003  015		Amount of	Each Disbu	rsement this Period
	WASHINGTON Purpose of Disbursement Political Contribution  Candidate Name  Office Sought: House Senate President State: District:	nent For: 20 Primary	20003  015		Amount of	Each Disbu	rsement this Period
C.	WASHINGTON Purpose of Disbursement Political Contribution  Candidate Name  Office Sought: House Senate President State: District:  Full Name (Last, First, Middle Initial)  FRIENDS OF JOHN BOEHNER	nent For: 20 Primary Other (speci	20003  015		Amount of  [MEMO IT	Each Disbu	2500.00
C.	WASHINGTON Purpose of Disbursement Political Contribution  Candidate Name  Office Sought: House Senate President State: District:  Full Name (Last, First, Middle Initial) FRIENDS OF JOHN BOEHNER  Mailing Address 7908 CINCINNATI DAYTON ROAD	nent For: 20 Primary Other (speci	20003  015		Amount of [MEMO IT	Each Disbu	2500.00
C.	WASHINGTON Purpose of Disbursement Political Contribution  Candidate Name  Office Sought: House Senate President State: District:  Full Name (Last, First, Middle Initial) FRIENDS OF JOHN BOEHNER  Mailing Address 7908 CINCINNATI DAYTON ROAD SUITE I	nent For: 20 Primary Other (speci	20003  015		Amount of  [MEMO IT!  Date of Dis  M M M / O6	Each Disbu	2500.00 2500.00
C.	WASHINGTON Purpose of Disbursement Political Contribution  Candidate Name  Office Sought: House Senate President State: District:  Full Name (Last, First, Middle Initial) FRIENDS OF JOHN BOEHNER  Mailing Address 7908 CINCINNATI DAYTON ROAD SUITE I  City WEST CHESTER	nent For: 20 Primary Other (speci	20003  O15 General fy)  Other		Amount of  [MEMO IT!  Date of Dis  M M M / O6	Each Disbu	2500.00 2500.00
C.	WASHINGTON Purpose of Disbursement Political Contribution  Candidate Name  Office Sought: House Senate President State: District:  Full Name (Last, First, Middle Initial) FRIENDS OF JOHN BOEHNER  Mailing Address 7908 CINCINNATI DAYTON ROAD SUITE I  City	nent For: 20 Primary Other (speci	20003  O15 General fy)  Other  Zip Code		Amount of  [MEMO ITI  Date of Dia  M M M / 06	Each Disbusement  sbursement  15	2500.00 2500.00 2500.00
C.	WASHINGTON Purpose of Disbursement Political Contribution  Candidate Name  Office Sought: House Senate President State: District:  Full Name (Last, First, Middle Initial) FRIENDS OF JOHN BOEHNER  Mailing Address 7908 CINCINNATI DAYTON ROAD SUITE I  City SENATOR OF SUITE	nent For: 20 Primary Other (speci	20003  O15 General fy)  Other  Zip Code	Type	Amount of  [MEMO ITI  Date of Dia  M M M / 06	Each Disbusement  sbursement  15	2500.00 2500.00
C.	WASHINGTON Purpose of Disbursement Political Contribution  Candidate Name  Office Sought: House Senate President State: District:  Full Name (Last, First, Middle Initial) FRIENDS OF JOHN BOEHNER  Mailing Address 7908 CINCINNATI DAYTON ROAD SUITE I  City S WEST CHESTER Purpose of Disbursement	nent For: 20 Primary Other (speci	20003  O15 General fy)  Other  Zip Code	Type  Category/	Amount of  [MEMO ITI  Date of Dia  M M M / 06	Each Disbusement  sbursement  15	2500.00 2500.00 2500.00
C.	WASHINGTON Purpose of Disbursement Political Contribution  Candidate Name  Office Sought: House Senate President State: District:  Full Name (Last, First, Middle Initial) FRIENDS OF JOHN BOEHNER  Mailing Address 7908 CINCINNATI DAYTON ROAD SUITE I  City WEST CHESTER Purpose of Disbursement Political Contribution  Candidate Name JOHN BOEHNER	nent For: 20 Primary Other (speci	20003  O15  General fy) ▼ Other  Zip Code 45069	Type	Amount of  [MEMO ITI  Date of Dia  M M M / 06  Transact  Amount of	Each Disbu	2500.00  2500.00  2500.00  2015  23.5048.1
C.	WASHINGTON Purpose of Disbursement Political Contribution  Candidate Name  Office Sought: House Senate President State: District:  Full Name (Last, First, Middle Initial) FRIENDS OF JOHN BOEHNER  Mailing Address 7908 CINCINNATI DAYTON ROAD SUITE I  City Senate Purpose of Disbursement Political Contribution  Candidate Name JOHN BOEHNER  Office Sought: House Senate Disbursement Political Contribution	nent For: 20 Primary Other (speci	20003  O15 General fy)  Other  Zip Code 45069	Type  Category/	Amount of  [MEMO ITI  Date of Dia  M M M / 06	Each Disbu	2500.00  2500.00  2500.00  2015  23.5048.1
C.	WASHINGTON Purpose of Disbursement Political Contribution  Candidate Name  Office Sought: House Senate President State: District:  Full Name (Last, First, Middle Initial)  FRIENDS OF JOHN BOEHNER  Mailing Address 7908 CINCINNATI DAYTON ROAD SUITE I  City WEST CHESTER Purpose of Disbursement Political Contribution  Candidate Name JOHN BOEHNER  Office Sought: House Senate President  Senate President	nent For: 20 Primary Other (speci	20003  O15 General fy)  Other  Zip Code 45069	Type  Category/	Amount of  [MEMO ITI  Date of Dia  M M M / 06  Transact  Amount of	Each Disbu	2500.00  2500.00  2500.00  2015  23.5048.1
C.	WASHINGTON Purpose of Disbursement Political Contribution  Candidate Name  Office Sought: House Senate President State: District:  Full Name (Last, First, Middle Initial) FRIENDS OF JOHN BOEHNER  Mailing Address 7908 CINCINNATI DAYTON ROAD SUITE I  City Senate Purpose of Disbursement Political Contribution  Candidate Name JOHN BOEHNER  Office Sought: House Senate Disbursement Political Contribution	nent For: 20 Primary Other (speci	20003  O15 General fy)  Other  Zip Code 45069	Type  Category/	Amount of  [MEMO ITI  Date of Dia  M M M / 06  Transact  Amount of	Each Disbu	2500.00  2500.00  2500.00  2015  23.5048.1
<b>c</b> .	WASHINGTON Purpose of Disbursement Political Contribution  Candidate Name  Office Sought: House Senate President State: District:  Full Name (Last, First, Middle Initial) FRIENDS OF JOHN BOEHNER  Mailing Address 7908 CINCINNATI DAYTON ROAD SUITE I  City	nent For: 20 Primary Other (speci	20003  O15 General fy)  Other  Other  O16 General fy)  Fig. 12  O16 General fy)  Fig. 12  O17  O18  O19  O19  O19  O19  O19  O19  O19	Type  Category/ Type	Amount of  [MEMO ITI  Date of Dia  M M M / 06  Transact  Amount of	Each Disbu	2500.00  2500.00  2500.00  2015  23.5048.1
<b>c</b> .	WASHINGTON Purpose of Disbursement Political Contribution  Candidate Name  Office Sought: House Senate President State: District:  Full Name (Last, First, Middle Initial)  FRIENDS OF JOHN BOEHNER  Mailing Address 7908 CINCINNATI DAYTON ROAD SUITE I  City WEST CHESTER Purpose of Disbursement Political Contribution  Candidate Name JOHN BOEHNER  Office Sought: House Senate President  Senate President	nent For: 20 Primary Other (speci	20003  O15 General fy)  Other  Other  O16 General fy)  Fig. 12  O16 General fy)  Fig. 12  O17  O18  O19  O19  O19  O19  O19  O19  O19	Type  Category/ Type	Amount of  [MEMO ITI  Date of Dia  M M M / 06  Transact  Amount of	Each Disbu	2500.00  2500.00  2500.00  23.5048.1  2500.00

SCHEDULE B (FEC Form 3X)		FOR LINE NUMBER: PAGE 12 OF 16			
ITEMIZED DISBURSEMENTS	Use separate schedule(s)	)   FOR LINE (check only	NOMBELL:		
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	Detailed Suffillary Page	27	28a 28b 28c 29 30b		
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or for commercial purposes, other than using the na					
NAME OF COMMITTEE (In Full)					
$ \; angle$ CROP INSURANCE PROFESSIC	NALS ASSOCIATION	ON PAC-CIF	PA PAC		
<u> </u>					
Full Name (Last, First, Middle Initial)			Date of Disbursement		
BYRNE FOR CONGRESS INC					
Mailing Address PO BOX 2743			06 26 2015		
3 3 3 3 3 5 7 <b>C 2 3</b> 7 1 1 3					
City	State Zip Code		Transaction ID : SB23.5060		
MOBILE	AL 36652		Transaction ID . 3B23.3000		
Purpose of Disbursement Political Contribution			Amount of Each Dights account this David		
Candidate Name			Amount of Each Disbursement this Period		
BRADLEY ROBERTS BYRNE		Category/ Type	1000.00		
	ment For: 2016	1,750			
Senate	Primary General				
President	Other (specify) ▼				
State: AL District: 01					
Full Name (Last, First, Middle Initial)					
B. CONAWAY FOR CONGRESS			Date of Disbursement		
Mailian Address DO DOV Tropp			M M / D D / Y Y Y Y Y		
Mailing Address PO BOX 51272			06 15 2015		
City	State Zip Code		T ID ODGG 5055		
MIDLAND	TX 79710		Transaction ID: SB23.5057		
Purpose of Disbursement Political Contribution					
			Amount of Each Disbursement this Period		
Candidate Name HON MICHAEL CONAWAY		Category/	5000.00		
	ment For: 2016	Туре	7		
Senate Sought.	Primary General				
President	Other (specify) ▼				
State: TX District: 11	, , , , ,				
Full Name (Last, First, Middle Initial)					
DOUG LAMALFA COMMITTEE			Date of Disbursement		
Mailing Address 2150 RIVER PLAZA DR., #150	06 15 2015				
City	State Zip Code				
SACRAMENTO	CA 95833		Transaction ID: SB23.5052		
Purpose of Disbursement					
Political Contribution			Amount of Each Disbursement this Period		
Candidate Name		Category/	1000.00		
DOUG LAMALFA	west fam. so:-	Туре	1000.00		
Office Sought: House Disburse Senate	ment For: 2016  Primary General				
President	Other (specify)				
State: CA District: 01	Caron (openity)				
01					
SUBTOTAL of Disbursements This Page (optional).			7000.00		
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SCHEDULE B (FEC Form 3X)	Lloo concrete och adula (-)	FOR LINE NUMBER: PAGE 13 OF 16			
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	(check only 21b 27	one) 22 X 23 28a 28b	24 25 26 28c 29 30b	
Any information copied from such Reports and Stater or for commercial purposes, other than using the nan					
NAME OF COMMITTEE (In Full) CROP INSURANCE PROFESSIO	NALS ASSOCIATIO	N PAC-CIF	PA PAC		
A. DUFFY FOR CONGRESS  Mailing Address PO BOX 529			Date of Disbursement  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
Mailing Address PO BOX 538	State Zin Code		06 15	2015	
WAUSAU	State Zip Code WI 54402		Transaction ID : S	6B23.5056	
Purpose of Disbursement Political Contribution			Amount of Each Di	sbursement this Period	
Candidate Name SEAN DUFFY		Category/ Type		1000.00	
Senate President	nent For: 2016 Primary General Other (specify)				
State: WI District: 07  Full Name (Last, First, Middle Initial)					
B. FRIENDS OF JOHN THUNE			Date of Disburseme	ent	
Mailing Address PO BOX 841			06 26 2015		
City SIOUX FALLS	State Zip Code SD 57101		Transaction ID : \$	SB23.5064	
Purpose of Disbursement Political Contribution			Amount of Each Di	sbursement this Period	
Candidate Name JOHN R THUNE		Category/ Type		1000.00	
	ment For: 2016 Primary General Other (specify) ▼				
Full Name (Last, First, Middle Initial) HOEVEN FOR SENATE			Date of Disburseme		
Mailing Address PO BOX 15114			06 / 15	2015	
City State Zip Code ARLINGTON VA 22215			Transaction ID : \$	SB23.5058	
Purpose of Disbursement Political Contribution			Amount of Each Di	sbursement this Period	
Candidate Name JOHN HOEVEN	Category/ Type		1000.00		
Senate President	nent For: 2016 Primary General Other (specify)		,	,	
				2002.22	
SUBTOTAL of Disbursements This Page (optional)		·····		3000.00	
TOTAL This Period (last page this line number only)					

SCHEDULE B (FEC Form 3X)	Liea caparata cabadula(a)	FOR LINE NUMBER: PAGE 14 OF 16				
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	(check only 21b 27	one) 22 X 23 24 25 26 28a 28b 28c 29 30b			
Any information copied from such Reports and State or for commercial purposes, other than using the na						
NAME OF COMMITTEE (In Full) CROP INSURANCE PROFESSIO	NALS ASSOCIATIO	N PAC-CIF	PA PAC			
Full Name (Last, First, Middle Initial)	Full Name (Last, First, Middle Initial) HOEVEN FOR SENATE					
Mailing Address PO BOX 15114			Date of Disbursement  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
City	State Zip Code		Transportion ID - CD02 F0C2			
ARLINGTON	VA 22215		Transaction ID : SB23.5063			
Purpose of Disbursement Political Contribution			Amount of Each Disbursement this Period			
Candidate Name  JOHN HOEVEN		Category/ Type	2500.00			
	ement For: 2016 Primary General Other (specify)	31-1	, ,			
State: ND District: 00	-					
B. MIKE ROGERS FOR CONGRES	S		Date of Disbursement			
Mailing Address 123 EAST 13TH STREET	Mailing Address 123 EAST 13TH STREET					
City ANNISTON Purpose of Disbursement	State Zip Code AL 36201		Transaction ID : SB23.5050			
Political Contribution			Amount of Each Disbursement this Period			
Candidate Name MICHAEL ROGERS		Category/ Type	1000.00			
Office Sought: House Disburse	ement For: 2016 Primary General Other (specify)	71-				
Full Name (Last, First, Middle Initial) MORAN FOR KANSAS			Date of Disbursement			
Mailing Address PO BOX 1151		06 15 2015				
City HAYS						
Purpose of Disbursement Political Contribution			Amount of Fook Dichuronment this Device			
Candidate Name JERRY MORAN	Category/ Type	Amount of Each Disbursement this Period 2000.00				
Office Sought:  House Senate President State: KS District: 00	ement For: 2016 Primary General Other (specify) ▼					
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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 15 OF 16			
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 27	one)  22 X 23 24 25 26  28a 28b 28c 29 30l		
Any information copied from such Reports and State or for commercial purposes, other than using the nar					
NAME OF COMMITTEE (In Full) CROP INSURANCE PROFESSIO	NALS ASSOCIATIO	N PAC-CIF	PA PAC		
Full Name (Last, First, Middle Initial)			Date of Disbursement		
A. MORAN FOR KANSAS			Man / D D / Y Y Y Y		
Mailing Address PO BOX 1151			06 15 2015		
City HAYS	State Zip Code KS 67601		Transaction ID : SB23.5054		
Purpose of Disbursement Political Contribution	10 07001		Amount of Each Disbursement this Period		
Candidate Name JERRY MORAN		Category/ Type	3000.00		
Office Sought: House Disburse  Senate  President	ment For: 2016 Primary				
State: KS District: 00					
Full Name (Last, First, Middle Initial)  B. PETERSON FOR CONGRESS			Date of Disbursement		
Mailing Address 26192 FLOYD LAKE POINT ROAD			06 15 2015		
DETROIT LAKES	State Zip Code MN 56501		Transaction ID : SB23.5059		
Purpose of Disbursement Political Contribution		· · · ·	Amount of Each Disbursement this Period		
Candidate Name COLLIN CLARK PETERSON		Category/ Type	3000.00		
	ment For: 2016 Primary General Other (specify)				
Full Name (Last, First, Middle Initial)  ROBERT ADERHOLT FOR CONGRESS			Date of Disbursement		
Mailing Address P. O. BOX 1158		06 15 2015			
City State Zip Code HALEYVILLE AL 35565			Transaction ID : SB23.5051		
Purpose of Disbursement Political Contribution		Amount of Each Disbursement this Period			
Candidate Name REP. ROBERT B. ADERHOLT	Category/ Type	1000.00			
Office Sought:    House   Disburse	,,				
SUBTOTAL of Disbursements This Page (optional)		<b>&gt;</b>	7000.00		
TOTAL This Period (last page this line number only	)				

SCHEDULE B (FEC Form 3X)	Hen concrete achadula/=\	FOR LINE I	-	PAGE 16 OF 16		
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	(check only 21b 27	one) 22 X 23 28a 28b	24 25 26 28c 29 30b		
Any information copied from such Reports and Staten or for commercial purposes, other than using the name	nents may not be sold or use ne and address of any politica	d by any perso al committee to	on for the purpose of solicit contributions fr	soliciting contributions om such committee.		
NAME OF COMMITTEE (In Full) CROP INSURANCE PROFESSION	NALS ASSOCIATIO	N PAC-CIF	PA PAC			
Full Name (Last, First, Middle Initial)  A. RODNEY FOR CONGRESS	Date of Disbursement					
Mailing Address PO BOX 344			06 15	2015		
City S TAYLORVILLE Purpose of Disbursement	State Zip Code IL 62568		Transaction ID : \$	SB23.5055		
Political Contribution  Candidate Name			Amount of Each Di	sbursement this Period		
RODNEY L DAVIS	nent For: 2016	Category/ Type		1000.00		
State: IL District: 13	Primary General Other (specify) ▼					
Full Name (Last, First, Middle Initial)  B. TEXANS FOR HENRY CUELLAR CO	ONGRESSIONAL CAN	MPAIGN	Date of Disburseme	ent		
Mailing Address 1519 WASHINGTON STREET SUITE 200			06 15 2015			
City S LAREDO Purpose of Disbursement	State Zip Code TX 78040		Transaction ID:	SB23.5044		
Political Contribution  Candidate Name		Catavany	Amount of Each Di	sbursement this Period		
HENRY R. CUELLAR  Office Sought:	nent For: 2016	Category/ Type		1000.00		
	Primary General Other (specify) ▼					
Full Name (Last, First, Middle Initial) VALADAO FOR CONGRESS			Date of Disburseme	ent		
Mailing Address 504 VAN NESS			06 15	2015		
City S FRESNO		Transaction ID : \$	SB23.5045			
Purpose of Disbursement Political Contribution  Candidate Name  DAVID VALADAO	Category/ Type	Amount of Each Di	sbursement this Period			
	nent For: 2016  Primary General  Other (specify)	75-				
SUBTOTAL of Disbursements This Page (optional)			7	3000.00		
TOTAL This Period (last page this line number only)		<b>&gt;</b>		30500.00		